Case 16-13601 Doc 1 Filed 04/21/16 Entered 04/21/16 11:14:16 Desc Main Document Page 1 of 67

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Kashondra First name R Middle name Lyles Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)	-
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9626		

Case 16-13601 Doc 1 Filed 04/21/16 Entered 04/21/16 11:14:16 Desc Main Document Page 2 of 67
Case number (if known)

Debtor 1 Kashondra R Lyles

		About Debtor 1:	,	About Debtor 2 (Spouse Only in a Joint Case):			
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.				
	Include trade names and doing business as names	Business name(s)	ŀ	Business name(s)			
		EINs	E	EINs			
5.	Where you live		ı	f Debtor 2 lives at a different address:			
		43 Elizabeth Street Calumet City, IL 60409					
		Number, Street, City, State & ZIP Code	1	Number, Street, City, State & ZIP Code			
		Cook					
		County		County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.				
		Number, P.O. Box, Street, City, State & ZIP Code	1	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	,	Check one:			
bankruptcy		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. 			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	I	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Entered 04/21/16 11:14:16 Page 3 of 67 Case 16-13601 Doc 1 Filed 04/21/16 Desc Main

Document Case number (if known) Debtor 1 Kashondra R Lyles

7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. □ Chapter 7									
	choosing to file under										
		_	apter 11								
		_	apter 12								
		_	apter 13								
8.	How you will pay the fee	-	about how yo	u may pay. Typic attorney is submi	ally, if you are paying	the fee yourself	f, you may pay with cash	local court for more details cashier's check, or money a credit card or check with			
 I need to pay the fee in installments. If you choose this option, sign and attach the Applica The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 1. 							n and attach the Applica	ation for Individuals to Pay			
								of the official poverty line that this option, you must fill out			
							orm 103B) and file it with				
9.	Have you filed for bankruptcy within the	□ No.									
	last 8 years?	Yes									
			District	NDIL	When	2/12/09	Case number	1:09-bk-04385			
			District		When		Case number				
			District		When		Case number				
10.	Are any bankruptcy	■ No									
	cases pending or being filed by a spouse who is	☐ Yes	5.								
	not filing this case with you, or by a business partner, or by an affiliate?										
			Debtor				Relationship to y	ou			
			District		When		Case number, if	known			
			Debtor				Relationship to y	rou			
			District		When		Case number, if	known			
			your Go to line 12.								
11.	Do you rent your	■ No.	Go to li	ne 12.							
11.	Do you rent your residence?	■ No.			ned an eviction judgme	ent against you	and do you want to stay	in your residence?			
11.						ent against you	and do you want to stay	in your residence?			
11.			_{i.} Has yo	ur landlord obtain No. Go to line 12	2.			in your residence? 101A) and file it with this			

Deb	otor 1 Kashondra R Lyle	s		Document Page 4 of 67 Case number (if known)			
Par	Report About Any Bu	sinesses	You Owr	as a Sole Proprietor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	e and location of business			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	per, Street, City, State & ZIP Code			
	it to this petition.		Chec	k the appropriate box to describe your business:			
				Health Care Business (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as defined in 11 U.S.C. § 101(53A))			
				Commodity Broker (as defined in 11 U.S.C. § 101(6))			
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines	s. If you ir is, cash-fl	der Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate ndicate that you are a small business debtor, you must attach your most recent balance sheet, statement of low statement, and federal income tax return or if any of these documents do not exist, follow the procedure (1)(B).			
	For a definition of small	■ No.	I am r	not filing under Chapter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankr Code.				
		☐ Yes.	I am f	illing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code			
Par	t 4: Report if You Own or	Have Anv	Hazardo	ous Property or Any Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.					
	property that poses or is						
	alleged to pose a threat of imminent and identifiable hazard to public health or safety?	☐ Yes.	What is	the hazard?			
	Or do you own any property that needs immediate attention?			diate attention is why is it needed?			

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

Case 16-13601 Doc 1 Filed 04/21/16 Entered 04/21/16 11:14:16 Desc Main

Document Page 5 of 67

Debtor 1 Kashondra R Lyles

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 67 Case number (if known) Debtor 1 Kashondra R Lyles Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will □ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **\$50,001 - \$100,000** be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **□** \$100.001 - \$500.000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Kashondra R Lyles Signature of Debtor 2 Kashondra R Lyles Signature of Debtor 1 Executed on April 21, 2016 Executed on

MM / DD / YYYY

MM / DD / YYYY

Debtor 1 Kashondra R Lyles Document Page 7 of 67

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Jessica	a Bentz Holguin	Date	April 21, 2016
Signature of	Attorney for Debtor		MM / DD / YYYY
Jessica B	entz Holguin		
Printed name			
Bentz Hol	guin Law Firm, LLC		
Firm name	<u> </u>		
100 North	LaSalle Street		
Suite 812			
Chicago, I	L 60602		
	City, State & ZIP Code		
Contact phone	312.881.5112	Email address	JHolguin@BentzHolguinLaw.com
6295877			
Bar number & S	tate		

		1700.11111	an Faue ou oi	
Fill in this infor	mation to identify your	case:		
Debtor 1	Kashondra R Lyl	es		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				Chack if this is an
(II KIIOWII)				☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Por	Summariza Vaur Acceta		
Par	1: Summarize Your Assets		assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	60,158.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	20,625.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	80,783.00
Par	2: Summarize Your Liabilities		
			liabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	98,847.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	2,500.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	200,643.00
	Your total liabilities	\$	301,990.00
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,024.47
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,474.47
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other so	chedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a	a persona	l, family, or

Official Form 106Sum

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

Filed 04/21/16 Entered 04/21/16 11:14:16 Desc Main Case 16-13601 Doc 1 Document

Page 9 of 67
Case number (if known) Debtor 1 Kashondra R Lyles

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

3,344.08 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	2,500.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	91,136.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	93,636.00

	Ca	se 16-1360:	1 Doc 1		04/21/16 ument	Entered 04/21/10 Page 10 of 67	5 11:14:1	L6 De	sc N	Main	
Fill	in this inforn	nation to identify	your case and th			T AUX. TO OIL OF					
Deb	otor 1	Kashondra I		e Name		Last Name					
	otor 2 buse, if filing)	First Name	Middle	e Name		Last Name					
Unit	ted States Ba	nkruptcy Court for	the: NORTHER	RN DISTI	RICT OF ILLIN	NOIS					
Cas	se number _					-				Check if this is an amended filing	
_		rm 106A/E	=								
<u>Sc</u>	chedul	<u>e A/B: Pı</u>	operty							12/15	
hink nfor nsv	t it fits best. Be mation. If more wer every ques	e as complete and a space is needed, tion.	accurate as possibl attach a separate s	le. If two heet to th	married people is form. On the	in asset fits in more than one are filing together, both are e top of any additional pages,	equally respon	nsible for su	pplyi	ng correct	
_	_	, ,	uitable interest in a	any resid	ence, building,	land, or similar property?					
	No. Go to Part										
	Yes. Where is	s the property?									
1.1				What	is the property	? Check all that apply					
	43 Elizabe	th Street			Single-family h		Do not deduc	Oo not deduct secured claims or exemptions. Put			
	Street address,	if available, or other des	cription		Duplex or mult	· ·		ns on <i>Schedule D:</i> cured by Property.			
					Manufactured	or mobile home					
	Calumet C	ity IL	60409-0000		Land		Current valu entire prope	rty?		rent value of the tion you own?	
	City	State	ZIP Code		Investment pro	pperty	\$60	,158.00	_	\$60,158.00	
				What	Timeshare Other	in the property? Check one		simple, ten		wnership interest by the entireties, or	
				WIIO	Debtor 1 only	in the property: Check one	Fee simpl	•			
	Cook				Debtor 2 only						
	County				Debtor 1 and [•	☐ Check i	f this is com	muni	ty property	
				Othor		the debtors and another bu wish to add about this item	(see instr	,			
					rty identification		i, sucii as ioca	ai			
_						5 44 1 1 11		1			

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$60,158.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Deb	tor 1 K	ashondra R Lyles	Document Page 11 of	Case number (if known)	
3. C	ars, vans,	trucks, tractors, sport ut	tility vehicles, motorcycles		
	No				
-	Yes				
		Chevrolet		Do not deduct secur	red claims or exemptions. Put
3.1	Make:	Malibu	Who has an interest in the property? Check of	the amount of any se	ecured claims on Schedule D:
	Model: Year:	2010	Debtor 1 only		e Claims Secured by Property.
			☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Current value of th entire property?	e Current value of the portion you own?
		ormation:	At least one of the debtors and another	oo proporty.	pormon you omm.
			Check if this is community property (see instructions)	\$8,125.0	90 \$8,125.00
5 A	ages you		you own for all of your entries from Part 2, include. Write that number hereehold ltems		\$8,125.00
Do	ou own o	or have any legal or equita	able interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
<i>E</i>			, linens, china, kitchenware		
	- 103. DC	<u> </u>			
		Househol	d Goods and Furnishings		\$1,450.00
E		Televisions and radios; aud including cell phones, cam	dio, video, stereo, and digital equipment; computers leras, media players, games	s, printers, scanners; music col	lections; electronic devices
E		Antiques and figurines; pai other collections, memoral	ntings, prints, or other artwork; books, pictures, or obilia, collectibles	other art objects; stamp, coin, c	or baseball card collections;
E	xamples:	for sports and hobbies Sports, photographic, exer- musical instruments	cise, and other hobby equipment; bicycles, pool tab	les, golf clubs, skis; canoes ar	nd kayaks; carpentry tools;
	No Yes. De	scribe			
_	Firearms Examples	: Pistols, rifles, shotguns, a	ammunition, and related equipment		

Debtor 1	Kashondra R Ly	yles	ocument Page	e 12 of 67 Case number (if known)	
☐ No		s, furs, leather coats, desig	ner wear, shoes, accesso	ories	
	Po	ersonal Clothing			\$750.00
■ No		y, costume jewelry, engage	ement rings, wedding ring	s, heirloom jewelry, watches, gems,	gold, silver
Exar ■ No	farm animals nples: Dogs, cats, birds b. Describe	s, horses			
■ No	other personal and ho	·	ot already list, including	any health aids you did not list	
for	Part 3. Write that nun	nber here		es for pages you have attached	\$2,200.00
	escribe Your Financial own or have any lega	Assets I or equitable interest in a	ny of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No		e in your wallet, in your hom		and on hand when you file your petit	ion
Exar		gs, or other financial accou ou have multiple accounts v		t; shares in credit unions, brokerage ist each.	houses, and other similar
□ No ■ Yes	š		Institution name:		
	1	7.1. Checking	Bank of America	1	\$300.00
Exar ■ No		publicly traded stocks estment accounts with brok Institution or issuer na		et accounts	
joint ■ No	venture			d businesses, including an intere	st in an LLC, partnership, and
⊔ Yes	s. Give specific inform	ation about them Name of entity:		% of ownership:	
Nego Non- ■ No	otiable instruments incl negotiable instruments	e bonds and other negoti ude personal checks, cash s are those you cannot tran	iers' checks, promissory r	notes, and money orders.	
☐ Yes	s. Give specific informa	ation about them Issuer name:			

Case 16-13601 Doc 1 Filed 04/21/16 Entered 04/21/16 11:14:16 Desc Main Document Page 13 of 67

Debtor 1 Kashondra R Lyles 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ■ Yes..... 401K \$10,000.00 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ Yes. Name the insurance company of each policy and list its value. Beneficiary: Company name: Surrender or refund Official Form 106A/B Schedule A/B: Property page 4

Debtor 1	Case 16-13601 Kashondra R Lyles	Doc 1	Filed 04/21/16 Document	Entered 04/21/16 11:14:16 Page 14 of 67 Case number (if known)	Desc Main	
					value:	
If you somed	terest in property that is d are the beneficiary of a living one has died. Give specific information			ed esurance policy, or are currently entitled to rece	eive property because	
Exam _l ■ No —	33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No □ Yes. Describe each claim					
■ No	34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No □ Yes. Describe each claim					
■ No	nancial assets you did not Give specific information	already list				
	the dollar value of all of yo art 4. Write that number he			ny entries for pages you have attached	\$10,300.00	
Part 5: De	scribe Any Business-Related	Property You	Own or Have an Interest	In. List any real estate in Part 1.		
37. Do you	own or have any legal or equi	table interest	in any business-related p	property?		
No. Go	o to Part 6.					
☐ Yes. (Go to line 38.					
If y	escribe Any Farm- and Comme	armland, list it ir	n Part 1.	on or Have an Interest In.		

Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

Official Form 106A/B Schedule A/B: Property page 5

■ No. Go to Part 7.□ Yes. Go to line 47.

Part 7:

Doc 1 Filed 04/21/16 Entered 04/21/16 11:14:16 Desc Main Case 16-13601

Page 15 of 67
Case number (if known) Document Debtor 1 Kashondra R Lyles

Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$60,158.00
56.	Part 2: Total vehicles, line 5	\$8,125.00		
57.	Part 3: Total personal and household items, line 15	\$2,200.00		
58.	Part 4: Total financial assets, line 36	\$10,300.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$20,625.00	Copy personal property total	\$20,625.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$80,783.00

Official Form 106A/B Schedule A/B: Property page 6

		17000000	III FAUE TO OFO		
Fill in this infor	rmation to identify your	case:			
Debtor 1	Kashondra R Lyle	es			
	First Name	Middle Name	Last Name	_	
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	y the Pro	perty Yo	ou Claim	ı as Exempt	t
---------	----------	-----------	----------	----------	-------------	---

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Chec	ck only one box for each exemption.	
43 Elizabeth Street Calumet City, IL 60409 Cook County	\$60,158.00		\$0.00	735 ILCS 5/12-901
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
Household Goods and Furnishings Line from Schedule A/B: 6.1	\$1,450.00		\$1,450.00	735 ILCS 5/12-1001(b)
Elle Holli Schedule A/B. G.1			100% of fair market value, up to any applicable statutory limit	
Personal Clothing Line from Schedule A/B: 11.1	\$750.00		\$750.00	735 ILCS 5/12-1001(a)
Line from Schedule AVD. 1111			100% of fair market value, up to any applicable statutory limit	
Checking: Bank of America	\$300.00		\$300.00	735 ILCS 5/12-1001(b)
Line IIIIII Schedule PAB. 17.1			100% of fair market value, up to any applicable statutory limit	
401K Line from Schedule A/B: 24.1	\$10,000.00		\$10,000.00	735 ILCS 5/12-1006
LITE TOTT SCHEAUTE AVD. 24.1			100% of fair market value, up to any applicable statutory limit	

Entered 04/21/16 11:14:16 Case 16-13601 Filed 04/21/16 Desc Main Document Page 17 of 67 Debtor 1 Kashondra R Lyles Case number (if known) 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No

Doc 1

Yes

			Document F	Page 18	of 67		
Fill i	n this information	on to identify yοι	ur case:				
Debt	or 1	Kashondra R Ly	vles				
	•	rirst Name	•	ast Name		-	
Debt	_						
(Spous	se if, filing) F	First Name	Middle Name La	ast Name			
Unite	ed States Bankru	ptcy Court for the	: NORTHERN DISTRICT OF ILLING	SIC			
0							
(if know	e number wn)					☐ Check	if this is an
	,						ded filing
							3
Offic	cial Form 1	06D					
Sch	nedule D:	Creditors	Who Have Claims Se	ecured	by Propert	V	12/15
					<u> </u>	<u> </u>	
s nee			If two married people are filing together, out, number the entries, and attach it to the state of the state o				
	•	e claims secured b	v vour property?				
_		•	his form to the court with your other sch	nadulas Vc	nu have nothing else t	o report on this form	
_	_		•	iedules. 10	ou have nothing else t	o report on this form.	
	Yes. Fill in all	of the information	below.				
Part	1: List All Se	cured Claims			Column A	Column B	Column C
			more than one secured claim, list the credito a particular claim, list the other creditors in		Amount of claim	Value of collateral	Unsecured
			ical order according to the creditor's name.	rait 2. As	Do not deduct the	that supports this	portion
	Santander Co	neumor			value of collateral.	claim	If any
2.1	USA	Jiisuillei	Describe the property that secures the	claim:	\$14,450.00	\$8,125.00	\$6,325.00
	Creditor's Name		2010 Chevrolet Malibu 64000 m	niles	<u></u>		
	D- D 0040	4.5	As of the date you file, the claim is: Che	 ck all that			
	Po Box 96124 Fort Worth, T	-	apply.				
	Number, Street, City,		☐ Contingent☐ Unliquidated				
	Number, Street, City,	, State & Zip Code	☐ Disputed				
Who	owes the debt?	Check one.	Nature of lien. Check all that apply.				
■ De	ebtor 1 only		■ An agreement you made (such as mor	tgage or sec	ured		
□ De	ebtor 2 only		car loan)				
	ebtor 1 and Debtor	2 only	☐ Statutory lien (such as tax lien, mechan	nic's lien)			
_	t least one of the de		☐ Judgment lien from a lawsuit				
	heck if this claim community debt	relates to a	☐ Other (including a right to offset)				
·	ommunity debt						
		Opened					
		6/01/13					
Date	debt was incurred	Last Active 2/26/16	Last 4 digits of account number	1000			
2.2	Seaway Bank	« & Trust Co	Describe the property that secures the	claim:	\$84,397.00	\$60,158.00	\$24,239.00
(Creditor's Name		43 Elizabeth Street Calumet Ci				
			60409 Cook County				
	0.45 5 07:1 0:		As of the date you file, the claim is: Che	 ck all that			
	645 E 87th St Chicago, IL 6		apply.				
-	Number, Street, City,		☐ Contingent☐ Unliquidated				
	Number, Street, City,	, State & Zip Code	☐ Disputed				
Who	owes the debt?	Check one.	Nature of lien. Check all that apply.				
■ De	ebtor 1 only		An agreement you made (such as mor	tgage or sec	ured		
	ebtor 2 only		car loan)	5 .5			
	ebtor 1 and Debtor	2 only	☐ Statutory lien (such as tax lien, mechan	nic's lien)			
	t loogt one of the de	obtoro and another	Underwort lies from a lawquit				

Case 16-13601 Doc 1 Filed 04/21/16 Entered 04/21/16 11:14:16 Desc Main Document Page 19 of 67

Debtor 1 Kashondr	a R Lyles		Case	e number (if know)	
First Name	Middle Na	me Last Name			
☐ Check if this claim re	elates to a	Other (including a right to offset)			
Date debt was incurred	Opened 8/01/05 Last Active 12/10/15	Last 4 digits of account number	0040		
	of your form, add t	olumn A on this page. Write that number l he dollar value totals from all pages.	nere:	\$98,847.00 \$98,847.00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

			Docume	nt Page	20 of 6	7			
Fill	in this inform	ation to identify your	ase:						
Deb	tor 1	Kashondra R Lyle	es						
		First Name	Middle Name	Last Nam	е				
	tor 2 use if, filing)	First Name	Middle Name	Last Nam	e				
Unit	ed States Ban	kruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS					
Case	e number								
(if kno								ck if this is a	n
							ame	nded filing	
Offi	icial Form	106E/F							
Scł	nedule E/	F: Creditors W	ho Have Unsecu	red Claim	S			12/1	5
any e Sched Sched left. A name	executory contribute G: Execute dule D: Credito attach the Contribute and case num	acts or unexpired leases ory Contracts and Unexpi rs Who Have Claims Seci inuation Page to this pag	e Part 1 for creditors with PI that could result in a claim. ired Leases (Official Form 10 ured by Property. If more sp e. If you have no information secured Claims	Also list execute 06G). Do not incl ace is needed, co	ory contracts ude any cred opy the Part y	on Schedule A/B: I itors with partially s ou need, fill it out,	Property (Official F secured claims tha number the entries	orm 106A/B) t are listed ir s in the boxe	and on n s on the
		s have priority unsecured							
	No. Go to Pa		· o.ao agao. you .						
ı	Yes.								
2. l	List all of your place all of your place all of your possible, list the	e of claim it is. If a claim ha claims in alphabetical orde	s. If a creditor has more than one so both priority and nonpriority are according to the creditor's naticular claim, list the other creditorials.	amounts, list that ame. If you have n	claim here and	d show both priority a	and nonpriority amo	unts. As much	n as
((For an explanat	tion of each type of claim, s	ee the instructions for this form	m in the instruction	booklet.)	Total claim	Priority	Nonprior	ity
0.4]				0000	#0.500.00	amount	amount	40.00
2.1		Revenue Service ditor's Name	Last 4 digits of	account number	9626	\$2,500.00	\$2,500.0		\$0.00
	•	zed Insolvency	When was the	debt incurred?	2015 Tax	es	-		
	PO Box	7346							
	Philadel	phia, PA 19101-7346 eet City State Zlp Code		file the eleim	io. Chaalaall	that apply			
		the debt? Check one.	_	ou file, the claim	is: Check all	tnat apply			
	_		☐ Contingent						
	Debtor 1 or	nly	☐ Unliquidated						
	Debtor 2 or	nly	☐ Disputed						
	Debtor 1 ar	nd Debtor 2 only	Type of PRIOR	ITY unsecured cl	aim:				
	☐ At least one	e of the debtors and anothe	r Domestic su	pport obligations					
	☐ Check if th	is claim is for a commun	ity debt Taxes and c	ertain other debts	you owe the g	overnment			
	Is the claim su	ubject to offset?	☐ Claims for de	eath or personal in	jury while you	were intoxicated			
	■ No		☐ Other Speci	fv					
	Yes		GG. Gpoo.	.,					
Part	1 ist All	of Your NONPRIORIT	Y Unsecured Claims						
			ured claims against you?						
			art. Submit this form to the cou	urt with your other	schedules.				
ı	Yes.								
t	unsecured claim	, list the creditor separately	aims in the alphabetical order for each claim. For each claim st the other creditors in Part 3	m listed, identify w	hat type of cla	im it is. Do not list cl	aims already include	ed in Part 1. If	

Total claim

Case 16-13601 Doc 1 Filed 04/21/16 Entered 04/21/16 11:14:16 Desc Main Document Page 21 of 67

Debte	or 1 Kashondra R Lyles		Case number (if know)	
4.1	AMCA/Amer Medical Collection Agency	Last 4 digits of account number	2520	\$61.00
	Nonpriority Creditor's Name 4 Westchester Plaza Suite 110	When was the debt incurred?		
	Elmsford, NY 10523 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Med1 02 La	boratory Corp Of America	
4.2	American Honda Finance Nonpriority Creditor's Name	Last 4 digits of account number	9724	\$7,000.00
	2170 Point Blvd Elgin, IL 60123	When was the debt incurred?	Opened 2/01/12 Last Active 5/01/13	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Automobile	Deficiency	
4.3	Armor Systems Co Nonpriority Creditor's Name	Last 4 digits of account number	4638	\$419.00
	1700 Kiefer Dr Ste 1	When was the debt incurred?	Opened 3/01/15	
	Zion, IL 60099 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing		
	☐ Yes	Other. Specify Collection Anesthesic	Attorney University logists	

Case 16-13601 Doc 1 Filed 04/21/16 Entered 04/21/16 11:14:16 Desc Main Document Page 22 of 67

Debtor 1 Kashondra R Lyles Case number (if know) 4.4 \$0.00 **Barnes Real Estate** Last 4 digits of account number 1279 Nonpriority Creditor's Name C/O Lawrence Nathaniel D When was the debt incurred? 2835 N Sheffield 232 Chicago, IL 60657 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Notice only ☐ Yes 4.5 City of Chicago Last 4 digits of account number 8476 \$0.00 Nonpriority Creditor's Name C/O Heller Frisone LTD When was the debt incurred? 33 N LaSalle 1200 Chicago, IL 60602 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Admin Jdmt-Notice only** Other. Specify 4.6 \$491.00 Convergent Outsoucing, Inc Last 4 digits of account number 2231 Nonpriority Creditor's Name Po Box 9004 When was the debt incurred? Opened 9/01/14 Renton, WA 98057 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney Comcast ☐ Yes

Case 16-13601 Doc 1 Filed 04/21/16 Entered 04/21/16 11:14:16 Desc Mair Document Page 23 of 67
Case number (if know)

Debtor 1 Kashondra R Lyles 4.7 \$29,190.00 **Dept Of Ed/Navient** Last 4 digits of account number 2200 Nonpriority Creditor's Name Attn: Claims Dept Opened 1/17/01 Last Active Po Box 9400 When was the debt incurred? 1/01/15 Wilkes Barr, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ■ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Educational Dept Of Ed/Navient 4.8 Last 4 digits of account number 1006 \$11,090.00 Nonpriority Creditor's Name Attn: Claims Dept Opened 10/01/11 Last Active Po Box 9400 When was the debt incurred? 3/31/16 Wilkes Barr, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ■ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts T Yes Other. Specify Educational 4.9 **Dept Of Ed/Navient** Last 4 digits of account number 0918 \$9,534.00 Nonpriority Creditor's Name Attn: Claims Dept Opened 9/01/08 Last Active Po Box 9400 When was the debt incurred? 3/31/16 Wilkes Barr, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

Case 16-13601 Doc 1 Filed 04/21/16 Entered 04/21/16 11:14:16 Desc Main Document Page 24 of 67
Cashondra R I vies Cashondra R I vies

Debtor 1 Kashondra R Lyles 4.1 **Dept Of Ed/Navient** 0608 \$9,171.00 Last 4 digits of account number 0 Nonpriority Creditor's Name Attn: Claims Dept Opened 6/01/09 Last Active Po Box 9400 When was the debt incurred? 3/31/16 Wilkes Barr, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational 4.1 Dept Of Ed/Navient 1008 \$5,714.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Claims Dept Opened 10/01/10 Last Active Po Box 9400 When was the debt incurred? 3/31/16 Wilkes Barr, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Educational 4.1 0608 **Dept Of Ed/Navient** \$5,480.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Claims Dept Opened 6/01/09 Last Active Po Box 9400 When was the debt incurred? 3/31/16 Wilkes Barr, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes ☐ Other. Specify

Case 16-13601 Doc 1 Filed 04/21/16 Entered 04/21/16 11:14:16 Desc Main Document Page 25 of 67
Case number (if know)

Debtor 1 Kashondra R Lyles 4.1 \$4,940.00 Dept Of Ed/Navient 1222 Last 4 digits of account number 3 Nonpriority Creditor's Name Attn: Claims Dept Opened 12/01/10 Last Active Po Box 9400 When was the debt incurred? 3/31/16 Wilkes Barr, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational 4.1 Dept Of Ed/Navient 0324 \$4,408.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Claims Dept Opened 3/01/10 Last Active Po Box 9400 When was the debt incurred? 3/31/16 Wilkes Barr, PA 18773 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Educational 4.1 Dept Of Ed/Navient 0918 \$4,262.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Claims Dept Opened 9/01/08 Last Active Po Box 9400 When was the debt incurred? 3/31/16 Wilkes Barr, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes ☐ Other. Specify

Case 16-13601 Doc 1 Filed 04/21/16 Entered 04/21/16 11:14:16 Desc Main Document Page 26 of 67
Case number (if know)

Debtor 1 Kashondra R Lyles 4.1 **Dept Of Ed/Navient** 1008 \$3,771.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Attn: Claims Dept Opened 10/01/10 Last Active Po Box 9400 When was the debt incurred? 3/31/16 Wilkes Barr, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational 4.1 Dept Of Ed/Navient 0324 \$2,705.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Claims Dept Opened 3/01/10 Last Active Po Box 9400 When was the debt incurred? 3/31/16 Wilkes Barr, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Educational 4.1 **Dept Of Ed/Navient** 1222 \$871.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Claims Dept Opened 12/01/10 Last Active Po Box 9400 When was the debt incurred? 3/31/16 Wilkes Barr, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes ☐ Other. Specify

Page 27 of 67 Case number (if know) Document Debtor 1 Kashondra R Lyles 4.1 Franklin Collection Service 1160 \$875.00 Last 4 digits of account number q Nonpriority Creditor's Name C/O Blitt & Gaines PC When was the debt incurred? 661 Glenn Avenue Wheeling, IL 60090 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.2 Med Business Bureau 2100 \$12,510.00 Last 4 digits of account number 0 Nonpriority Creditor's Name 1460 Renaissance Dr Opened 4/01/15 When was the debt incurred? Suite 400 Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Med1 02 Rush ☐ Yes Other. Specify **University Medical Cent** 4.2 Med Business Bureau 2099 Last 4 digits of account number \$11,333.00 Nonpriority Creditor's Name 1460 Renaissance Dr When was the debt incurred? Opened 4/01/15 Suite 400 Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

Other. Specify University Medical Cent

Page 28 of 67 Case number (if know) Document Debtor 1 Kashondra R Lyles 4.2 Med Business Bureau 2107 \$9,646.00 Last 4 digits of account number 2 Nonpriority Creditor's Name 1460 Renaissance Dr When was the debt incurred? Opened 3/01/15 Suite 400 Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Med1 02 Rush ☐ Yes Other. Specify **University Medical Cent** 4.2 Med Business Bureau 2097 \$6,907.00 Last 4 digits of account number Nonpriority Creditor's Name 1460 Renaissance Dr When was the debt incurred? Opened 3/01/15 Suite 400 Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Med1 02 Rush ☐ Yes Other. Specify **University Medical Cent** 4.2 Med Business Bureau 2115 \$5,575.00 Last 4 digits of account number Nonpriority Creditor's Name 1460 Renaissance Dr When was the debt incurred? Opened 11/01/15 Suite 400 Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

Other. Specify University Medical Cent

Page 29 of 67 Case number (if know) Document Debtor 1 Kashondra R Lyles 4.2 Med Business Bureau 2104 \$5,038.00 Last 4 digits of account number 5 Nonpriority Creditor's Name 1460 Renaissance Dr When was the debt incurred? Opened 3/01/15 Suite 400 Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Med1 02 Rush ☐ Yes Other. Specify **University Medical Cent** 4.2 Med Business Bureau \$4,864.00 2095 Last 4 digits of account number Nonpriority Creditor's Name 1460 Renaissance Dr When was the debt incurred? Opened 3/01/15 Suite 400 Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Med1 02 Rush ☐ Yes Other. Specify **University Medical Cent** 4.2 Med Business Bureau 2096 \$4,065.00 Last 4 digits of account number Nonpriority Creditor's Name 1460 Renaissance Dr When was the debt incurred? Opened 1/01/15 Suite 400 Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts

Official Form 106 E/F

☐ Yes

Other. Specify University Medical Cent

Entered 04/21/16 11:14:16 Case 16-13601 Doc 1 Filed 04/21/16 Desc Main Document

Page 30 of 67 Case number (if know) Debtor 1 Kashondra R Lyles 4.2 Med Business Bureau 2103 \$3,929.00 Last 4 digits of account number 8 Nonpriority Creditor's Name 1460 Renaissance Dr When was the debt incurred? Opened 3/01/15 Suite 400 Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Med1 02 Rush ☐ Yes Other. Specify **University Medical Cent** 4.2 Med Business Bureau 2106 \$3,578.00 Last 4 digits of account number Nonpriority Creditor's Name 1460 Renaissance Dr When was the debt incurred? Opened 3/01/15 Suite 400 Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Med1 02 Rush ☐ Yes Other. Specify **University Medical Cent** 4.3 Med Business Bureau 2094 \$2,980.00 Last 4 digits of account number 0 Nonpriority Creditor's Name 1460 Renaissance Dr When was the debt incurred? Opened 3/01/15 Suite 400 Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Med1 02 Rush

☐ Yes

Other. Specify University Medical Cent

Page 31 of 67 Case number (if know) Document Debtor 1 Kashondra R Lyles 4.3 Med Business Bureau 2105 \$2,899.00 Last 4 digits of account number Nonpriority Creditor's Name 1460 Renaissance Dr When was the debt incurred? Opened 3/01/15 Suite 400 Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Med1 02 Rush ☐ Yes Other. Specify **University Medical Cent** 4.3 Med Business Bureau 2101 \$2.882.00 Last 4 digits of account number Nonpriority Creditor's Name 1460 Renaissance Dr When was the debt incurred? Opened 4/01/15 Suite 400 Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Med1 02 Rush ☐ Yes Other. Specify **University Medical Cent** 4.3 Med Business Bureau 2109 \$2,280.00 Last 4 digits of account number 3 Nonpriority Creditor's Name 1460 Renaissance Dr When was the debt incurred? Opened 3/01/15 Suite 400 Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

Other. Specify University Medical Cent

Entered 04/21/16 11:14:16 Case 16-13601 Doc 1 Filed 04/21/16 Desc Main

Page 32 of 67 Case number (if know) Document Debtor 1 Kashondra R Lyles 4.3 Med Business Bureau 2112 \$1,982.00 Last 4 digits of account number 4 Nonpriority Creditor's Name 1460 Renaissance Dr When was the debt incurred? Opened 6/01/15 Suite 400 Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Med1 02 Rush Other. Specify ☐ Yes **University Medical Cent** 4.3 **Merchants Credit** \$491.00 0488 Last 4 digits of account number Nonpriority Creditor's Name 223 W Jackson Blvd When was the debt incurred? Opened 5/01/12 Ste 700 Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Central Dupage** ☐ Yes Other. Specify Hospital 4.3 Miramed Revenue Group 1758 \$234.00 Last 4 digits of account number 6 Nonpriority Creditor's Name 991 Oak Creek Dr When was the debt incurred? Lombard, IL 60148 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another

Official Form 106 E/F

debt

■ No

☐ Yes

☐ Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Med1 02 Walgreens Infusion Resp Srvc

☐ Student loans

report as priority claims

☐ Check if this claim is for a community

Is the claim subject to offset?

Entered 04/21/16 11:14:16 Case 16-13601 Doc 1 Filed 04/21/16 Desc Main

Page 33 of 67 Case number (if know) Document Debtor 1 Kashondra R Lyles 4.3 \$4,503.00 **Nationwide Credit & Coll** 4352 Last 4 digits of account number Nonpriority Creditor's Name Attn Collections/Bankruptcy When was the debt incurred? Opened 1/01/16 815 Commerce Dr Ste 270 Oak Brook, IL 60523 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Rush University** Other. Specify ☐ Yes **Medical Center** 4.3 Nationwide Credit & Coll \$1.664.00 4351 Last 4 digits of account number Nonpriority Creditor's Name Attn Collections/Bankruptcy When was the debt incurred? Opened 1/01/16 815 Commerce Dr Ste 270 Oak Brook, IL 60523 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Rush University** Other. Specify ☐ Yes **Medical Center** 4.3 **Portfolio Recovery** 6871 \$1,063.00 Last 4 digits of account number 9 Nonpriority Creditor's Name Attn: Bankruptcy When was the debt incurred? Opened 7/01/13 Po Box 41067 Norfolk, VA 23541 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

☐ Yes

debt

■ No

Other. Specify Retail Bank

report as priority claims

☐ Obligations arising out of a separation agreement or divorce that you did not

Factoring Company Account Ge Capital

Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

Case 16-13601 Doc 1 Filed 04/21/16 Entered 04/21/16 11:14:16 Desc Main Document Page 34 of 67
Case number (if know)

Debtor 1 Kashondra R Lyles 4.4 Portfolio Recovery 4875 \$987.00 Last 4 digits of account number 0 Nonpriority Creditor's Name Attn: Bankruptcy Opened 8/01/14 When was the debt incurred? Po Box 41067 Norfolk, VA 23541 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Factoring Company Account Capital One** Other. Specify ☐ Yes Bank Usa N.A. \$8,125.00 Santander Consumer USA 1000 Last 4 digits of account number Nonpriority Creditor's Name Opened 6/01/13 Last Active Po Box 961245 When was the debt incurred? 2/26/16 Fort Worth, TX 76161 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Automobile unsecured portion ☐ Yes 4.4 Seaway Bank & Trust Co 0030 \$1,340.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 7/01/13 Last Active 645 E 87th St When was the debt incurred? 8/16/13 Chicago, IL 60619 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Unsecured

Debtor	1 Kashon	dra R Lyles	Document Page 3	5 of 6 Case n	7 iumber (i	if know)	
4.4		ank & Trust Co	Last 4 digits of account number	0034		_	\$84.00
	Nonpriority Cr 645 E 87th Chicago, I	St	When was the debt incurred?	Open 2/14/	ned 11/01/12 Last Active		
		t City State Zlp Code	As of the date you file, the claim	is: Check	all that a	pply	
	_	d the debt? Check one.	Пол				
	Debtor 1 o	•	Contingent				
	Debtor 2 o	inly and Debtor 2 only	☐ Unliquidated				
		•	☐ Disputed Type of NONPRIORITY unsecure	d claim:			
		e of the debtors and another	Student loans	u olalili.			
	debt	his claim is for a community	☐ Obligations arising out of a sep	aration ag	reement o	or divorce that you did not	
	Is the claim s	subject to offset?	report as priority claims				
	No		Debts to pension or profit-shari		and other	similar debts	
	☐ Yes		Other. Specify Unsecured	<u> </u>			
4.4 4	-	Of Phoenix	Last 4 digits of account number	5961		_	\$1,702.00
	Nonpriority Cr 1625 W Fo Tempe, AZ	ountainhead Pkwy	When was the debt incurred?	Open	ned 8/0	1/08	
	Number Stree	t City State ZIp Code	As of the date you file, the claim	is: Check	all that a	pply	
	Debtor 1 o	nly	☐ Contingent				
	Debtor 2 o	nly	☐ Unliquidated				
	Debtor 1 a	nd Debtor 2 only	☐ Disputed				
	☐ At least on	e of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
		his claim is for a community	☐ Student loans				
		subject to offset?	Obligations arising out of a sep- report as priority claims				
	No		Debts to pension or profit-shari	ng plans, a	and other	similar debts	
	☐ Yes		Other. Specify Unsecured	<u> </u>			
Part 3:	List Othe	ers to Be Notified About a Del	ot That You Already Listed				
is tryi have	ng to collect fi more than one	rom you for a debt you owe to so	about your bankruptcy, for a debt that omeone else, list the original creditor in t you listed in Parts 1 or 2, list the add or submit this page.	n Parts 1	or 2, the	n list the collection agency	here. Similarly, if you
Part 4:	Add the	Amounts for Each Type of Ur	nsecured Claim				
	the amounts of unsecured o		ims. This information is for statistical	eporting	purpose	s only. 28 U.S.C. §159. Ad	d the amounts for each
	60	Domostic support obligations		60	•	Total Claim	
	6a Total aims	. Domestic support obligations	5	6a.	\$	0.00	-
from P	Part 1 6b		•	6b.	\$	2,500.00	_
	6c		injury while you were intoxicated	6c.	\$	0.00	-
	6d	Other. Add all other priority uns	secured claims. Write that amount here.	6d.	\$	0.00	-
	6e	. Total Priority. Add lines 6a thro	ough 6d.	6e.	\$	2,500.00	_
						Total Claim	
	6f. Total	Student loans		6f.	\$	91,136.00	-

Official Form 106 E/F

claims

from Part 2

6g.

Obligations arising out of a separation agreement or divorce that you did not report as priority claims
Debts to pension or profit-sharing plans, and other similar debts

6g.

6h.

0.00

Debtor 1 Kashondra R Lyles

Page 36 of 67 Case number (if know)

			0.00
6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 109,507.00
6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 200,643.00

Official Form 106 E/F

Case 16-13601 Doc 1 Filed 04/21/16 Entered 04/21/16 11:14:16 Desc Main

		1/////////	10 1000.010101	
Fill in this infor	mation to identify your	case:		
Debtor 1	Kashondra R Lyl	es		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(4.1.1.2.11.)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
0	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.4	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
	J.,		State		

Case 16-13601 Doc 1 Filed 04/21/16 Entered 04/21/16 11:14:16 Desc Main

		Docume	ent Page 38 d	ot 67	
Fill in thi	is information to identify you	r case:			
Debtor 1	Kashondra R Ly	los			
Debior 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, f	iling) First Name	Middle Name	Last Name		
United St	tates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
•					
Case nur (if known)	mber				☐ Check if this is an
(amended filing
Officia	al Form 106H				
	dule H: Your Cod	lobtors			40/45
Sche	dule H. Your Cot	reprors			12/15
1. Do ■ No □ Ye 2. Wi Arizo ■ No		f you are filing a joint case, of you are filing a joint case, of your case, of your case, or with the second and the second a	do not list either spouse operty state or territo erto Rico, Texas, Wash	ry? (Community propert	
in lir Forn	ne 2 again as a codebtor only	if that person is a guaran al Form 106E/F), or Sched	tor or cosigner. Make	sure you have listed to 06G). Use Schedule D,	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, lin	
0.1	Name			□ Schedule E/F,	
				☐ Schedule G, lin	
	Number Street City	State	ZIP Code		
	Oity	Otate	Zii Gode		
3.2				☐ Schedule D, lin	na
0.2	Name			Schedule E/F,	
				☐ Schedule G, lin	
				— Scriedule G, IIII	
	Number Street	State	7ID Codo		
	City	State	ZIP Code		

Case 16-13601 Doc 1 Filed 04/21/16 Entered 04/21/16 11:14:16 Desc Main Document Page 39 of 67

Fill	in this information to identify your c	ase:						
	btor 1 Kashondra							
	btor 2 buse, if filing)				_			
Uni	ited States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS		_			
(If kr	se number fficial Form 106l					13 income	ed filing ent showing postp as of the following	
_	chedule I: Your Inc	ome				MM / DD/ Y	YYY	12/15
sup spo atta Par	as complete and accurate as possible plying correct information. If you use. If you are separated and you ch a separate sheet to this form. The describe Employment	are married and not filing wi	ng jointly, and your s ith you, do not includ	pouse i e inforn	s living w nation ab	ith you, incl out your spo	ude information ouse. If more spa	about your ace is needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-filing sp	ouse
	If you have more than one job, attach a separate page with	Employment status	■ Employed			☐ Emple	-	
	information about additional employers.		☐ Not employed			☐ Not e	mployed	
	Include part-time, seasonal, or	Occupation	Purchasing Assi	stant		_		
	self-employed work.	Employer's name	Genuine Auto Pa	rts				
	Occupation may include student or homemaker, if it applies.	Employer's address	901 West Divisio Chicago, IL 6061					
		How long employed t	here? One yea	r				
Pai	Give Details About Mor	nthly Income						
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to rep	oort for a	any line, w	rite \$0 in the	space. Include ye	our non-filing
	ou or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	for all e	mployers	for that perso	on on the lines be	low. If you need
					For I	Debtor 1	For Debtor 2 non-filing spo	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	3,344.08	\$	N/A
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A

3,344.08

N/A

Calculate gross Income. Add line 2 + line 3.

Case 16-13601 Doc 1 Filed 04/21/16 Entered 04/21/16 11:14:16 Desc Main Document Page 40 of 67

Deb	tor 1	Kashondra R Lyles	_	С	ase nur	mber (<i>if known</i>)	_				
					For Do	ebtor 1		For I	Debtor :	2 or	
					FOI DE	י וטוטו			filing s		
	Сор	y line 4 here	4.		\$	3,344.08	_	\$		N/A	-
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	ì.	\$	774.02		\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b).	\$	0.00	-	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	50	: .	\$	109.20	_	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d		\$	0.00	_	\$		N/A	_
	5e.	Insurance	5e		\$	408.83	_	\$		N/A	_
	5f.	Domestic support obligations	5f.		\$	0.00	_	\$		N/A	_
	5g.	Union dues Other deductions. Specify: Basic Life	5g	,	\$ \$	0.00	_	\$		N/A	_
	5h.		_ 311		ֆ \$	10.49 17.07	_	+ \$		N/A N/A	_
•	A -1 -1	Legal			· —		_	· : —			_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	1,319.61	_	\$		N/A	=
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	,	₿	2,024.47	_	\$		N/A	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a		\$	0.00		\$		NI/A	
	8b.	Interest and dividends	8b		\$	0.00 0.00		^φ		N/A N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent		,.	Ψ	0.00	-	Ψ		IN/A	=
		regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80	: . :	\$	0.00)	\$		N/A	
	8d.	Unemployment compensation	8d		\$	0.00	_	\$		N/A	_
	8e.	Social Security	8e).	\$	0.00	_	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.		\$	0.00	_	\$		N/A	_
	8g.	Pension or retirement income	8g	J.	\$	0.00		\$		N/A	_
	8h.	Other monthly income. Specify:	8h	1.+	\$	0.00	_ +	- \$		N/A	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		0.00		\$		N/A	4
10.	Calc	culate monthly income. Add line 7 + line 9.	10.	\$	2 ()24.47 +			N/A	= \$	2,024.47
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	.0.	Ψ_	۷,۰		_		14/7	_	2,024.47
11.	Stat Inclu	e all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your refriends or relatives. not include any amounts already included in lines 2-10 or amounts that are not	depe availa	able	to pay	expenses li			chedule 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certaies							12.	\$	2,024.47
										Combi	
13.	Do y	you expect an increase or decrease within the year after you file this form No.	?							month	ly income
	П	Yes, Explain:									Ī

Case 16-13601 Doc 1 Filed 04/21/16 Entered 04/21/16 11:14:16 Desc Main Document Page 41 of 67

Filli	n this information	on to identify yo	our case:					
Debt	or 1	Kashondra F	R Lyles			Chec	ck if this is:	
Debt	_		-			_	An amended filing	ving postpetition chapter
	use, if filing)						13 expenses as of	
Unite	ed States Bankrup	otcy Court for the:	NORTH	IERN DISTRICT OF ILLIN	NOIS	-	MM / DD / YYYY	
Case	e number							
(If kr	nown)							
Of	ficial For	m 106J						
Sc	hedule	J: Your I	Exper	ises				12/15
info	rmation. If mo		eded, atta	If two married people a ch another sheet to this n.				
Part		oe Your House	hold					
1.	Is this a joint							
	■ No. Go to I		n a sonar	ate household?				
	□ res. Does		ii a sepai	ate nousenoid:				
			st file Offici	al Form 106J-2, <i>Expense</i>	s for Separate House	hold of Deb	tor 2.	
2.	Do you have	dependents?	■ No					
۷.	Do not list Del	•	_	Fill out this information for	Dependent's relati	onshin to	Dependent's	Does dependent
	Debtor 2.	Jioi i and	☐ Yes.	each dependent	Debtor 1 or Debtor		age	live with you?
	Do not state th	ne						□ No
	dependents na	ames.						Yes
								□ No
								☐ Yes ☐ No
								□ No □ Yes
								□ No
								☐ Yes
3.	Do your expe	enses include		No				
		people other the your depender	han 👝	Yes				
Part		te Your Ongoi						
exp				uptcy filing date unless y is filed. If this is a sup				
the	value of such	assistance and		government assistance cluded it on <i>Schedule I:</i>			Your expe	
(Off	icial Form 106	l.)					Tour expe	#115 6 5
4.		home owners		ses for your residence. r lot.	Include first mortgage	e 4. \$		706.45
	If not include	d in line 4:						
	4a. Real es	tate taxes				4a. \$		0.00
		y, homeowner's				4b. \$		0.00
				ipkeep expenses		4c. \$		0.00
		wner's associat		dominium dues o ur residence, such as ho		4d. \$ 5. \$		0.00

Case 16-13601 Doc 1 Filed 04/21/16 Entered 04/21/16 11:14:16 Desc Main Document Page 42 of 67

Debtor 1	Kashondra R Lyles		Case num	ber (if known)	
6. Uti	ities:				
6a.	Electricity, heat, natural	gas	6a.	\$	125.00
6b.	Water, sewer, garbage of	•	6b.	· -	40.00
6c.		nternet, satellite, and cable services	6c.	·	126.00
6d.	Other. Specify:	morrot, catolito, and capie corried	6d.		0.00
	od and housekeeping sup	nlies		·	180.00
	ldcare and children's edu	-	8.	·	0.00
_	thing, laundry, and dry cl		9.	\$	0.00
	sonal care products and	-	10.	· -	
	•			·	0.00
	dical and dental expenses	maintenance, bus or train fare.	11.	\$	63.02
	nsportation. Include gas, i not include car payments.	namenance, bus or train rare.	12.	\$	80.00
		tion, newspapers, magazines, and books	13.	·	0.00
	aritable contributions and		14.	·	0.00
	urance.	rengious donations	17.	Ψ	0.00
-		cted from your pay or included in lines 4 or 20			
	. Life insurance	year pay or moradod in initio 4 of 20	15a.	\$	0.00
	. Health insurance		15b.	· ·	0.00
-	. Vehicle insurance		15c.	· ·	154.00
	. Other insurance. Specify:		15d.		0.00
		educted from your pay or included in lines 4 or		<u> </u>	0.00
_	cify:	saudica from your pay or moracea in inico 4 or	16.	\$	0.00
	allment or lease paymen	ts:			0.00
	. Car payments for Vehicl		17a.	\$	0.00
17b	. Car payments for Vehicl	e 2	17b.	\$	0.00
	. Other. Specify:		17c.	\$	0.00
	. Other. Specify:		17d.	\$	0.00
		naintenance, and support that you did not r		· -	
		ine 5, Schedule I, Your Income (Official For		\$	0.00
9. Otł	er payments you make to	support others who do not live with you.	•	\$	0.00
Spe	cify:		19.		
		s not included in lines 4 or 5 of this form or			
20a	. Mortgages on other prop	perty	20a.	\$	0.00
20t	. Real estate taxes		20b.	\$	0.00
200	. Property, homeowner's,	or renter's insurance	20c.	\$	0.00
200	. Maintenance, repair, and	d upkeep expenses	20d.	\$	0.00
20€	. Homeowner's association	on or condominium dues	20e.	\$	0.00
i. Oth	er: Specify:		21.	+\$	0.00
	culate your monthly expe	nses			
	. Add lines 4 through 21.			\$	1,474.47
		penses for Debtor 2), if any, from Official Form	106J-2	\$	
220	. Add line 22a and 22b. Th	ne result is your monthly expenses.		\$	1,474.47
3 C~	culate your monthly net i	ncome			
	•		222	¢	2 024 47
	. Copy line 12 (your commonthly expe	pined monthly income) from Schedule I.	23a.		2,024.47
230	. Copy your monthly expe	HISES HUITI IIITE ZZU ADUVE.	23b.	-φ	1,474.47
230	Subtract your monthly a	xpenses from your monthly income.			
230	The result is your <i>month</i>		23c.	\$	550.00
				1	
		r decrease in your expenses within the yea			
		sh paying for your car loan within the year or do you e	expect your mortgage	payment to increase	or decrease because o
	ification to the terms of your m	ortgage ?			
	res. Explain here	• •			

Case 16-13601 Doc 1 Filed 04/21/16 Entered 04/21/16 11:14:16 Desc Main Document Page 43 of 67

Fill in this infor	mation to identify your o	ase:			
Debtor 1	Kashondra R Lyle	s			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an
					amended filing
o =	4005				
Official Forr			_		
Declarat	ion About a	n Individual	Debtor's So	chedules	12/15
If two married pe	eople are filing together	, both are equally respon	sible for supplying cor	rect information.	
You must file thi	s form whenever you fil	e bankruptov schedules	or amended schedules	s. Making a false stat	ement, concealing property, or
obtaining money	y or property by fraud in	connection with a bankr			00, or imprisonment for up to 20
years, or both. 1	8 U.S.C. §§ 152, 1341, 1	519, and 3571.			
Sign	n Below				
Sigi	II Delow				
Did you na	v or agree to pay some	one who is NOT an attorn	ev to help you fill out b	hankruptcy forms?	
Dia you pu	y or agree to pay come		oy to holp you ill out .	oannapio, ronno	
■ No					
□ Yes. N	Name of person			Attach Ran	kruptcy Petition Preparer's Notice,
					n, and Signature (Official Form 119)
Under nena	Ity of perjury I declare	hat I have read the sumn	nary and schedules file	ad with this declarati	on and
	e true and correct.	ilat i llave leau tile Stillil	iary and schedules me	with this declarati	on and
V /a/ //	shandra D Lylaa		v		
	shondra R Lyles ndra R Lyles		X Signature of	Debtor 2	
	re of Debtor 1		Signature of	DODIOI Z	

Date _____

Date April 21, 2016

Case 16-13601 Doc 1 Filed 04/21/16 Entered 04/21/16 11:14:16 Desc Main Document Page 44 of 67

-HI	in this inform	nation to identify you	r 00001								
De	btor 1	Kashondra R Ly First Name	Middle Name	Last Name							
	btor 2 buse if, filing)	First Name	Middle Name	Last Name							
Uni	ited States Bar	nkruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS							
	se number				_	Check if this is an amended filing					
Sta Be a info	as complete a	of Financial	attach a separate sheet to	are filing together, both are	ankruptcy equally responsible for sup additional pages, write you						
	<u> </u>		arital Status and Where You	Lived Before							
1.	What is your	current marital statu	ıs?								
	☐ Married ■ Not marri	ried									
2.	During the la	uring the last 3 years, have you lived anywhere other than where you live now?									
	■ No □ Yes. List	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>.</i>						
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there					
3. stat					ity property state or territor co, Texas, Washington and V						
	■ No □ Yes. Ma	ke sure you fill out <i>Scl</i>	hedule H: Your Codebtors (O	fficial Form 106H).							
Pa	rt 2 Explain	n the Sources of You	r Income								
4.	Fill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receiv	all businesses, including part-		ndar years?					
	□ No ■ Yes. Fill	in the details.									
			Debtor 1		Debtor 2						
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)					
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$10,703.00	☐ Wages, commissions, bonuses, tips						
			☐ Operating a business		☐ Operating a business						

Official Form 107

Case 16-13601 Doc 1 Filed 04/21/16 Entered 04/21/16 11:14:16 Desc Main Page 45 of 67
Case number (if known) Document

Debtor 1 Kashondra R Lyles

				5.14		D.1.	
				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	r last caler nuary 1 to		r 31, 2015)	■ Wages, commissions, bonuses, tips	\$39,930.00	☐ Wages, commissi bonuses, tips	ons,
				☐ Operating a business		☐ Operating a busin	ess
			efore that: r 31, 2014)	■ Wages, commissions, bonuses, tips	\$39,120.00	☐ Wages, commissi bonuses, tips	ons,
				☐ Operating a business		☐ Operating a busin	ess
5.	Include in and other winnings. List each	come rega public ben If you are f	rdless of whet efit payments illing a joint ca I the gross inc	ne during this year or the two her that income is taxable. Ex- ; pensions; rental income; intel se and you have income that you ome from each source separa	amples of other income are a rest; dividends; money collect you received together, list it o	ed from lawsuits; royali nly once under Debtor	
				Debtor 1		Debtor 2	
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
	. loot oolo	ndar year:	04 0045	Pensions and	\$23,526.00		
		Decembe	r 31, 2015)	Annuities			
			r 31, 2015)	Annuities IRA Distribution	\$2,500.00		
(Ja	nuary 1 to	Decembe	. ,	IRA Distribution	<u> </u>		
(Ja	rt 3: Lis	Decembe	ayments You	IRA Distribution	Bankruptcy		
(Ja	rt 3: Lis	t Certain F r Debtor 1 Neither I	ayments You s or Debtor 2 Debtor 1 nor	IRA Distribution u Made Before You Filed for 2's debts primarily consume	Bankruptcy r debts? umer debts. Consumer debts	are defined in 11 U.S.	C. § 101(8) as "incurred by an
(Ja	rt 3: Lis	t Certain F T Debtor 1 Neither I individua During th	Payments You Payme	IRA Distribution u Made Before You Filed for 2's debts primarily consume Debtor 2 has primarily consi	Bankruptcy r debts? umer debts. Consumer debts ld purpose."		C. § 101(8) as "incurred by an
(Ja	rt 3: Lis	t Certain F T Debtor 1 Neither I individua During th No.	ayments You s or Debtor 2 Debtor 1 nor I primarily for e 90 days bef Go to line	IRA Distribution u Made Before You Filed for 2's debts primarily consume Debtor 2 has primarily consume a personal, family, or househo ore you filed for bankruptcy, di 7.	Bankruptcy r debts? umer debts. Consumer debts ld purpose." id you pay any creditor a total	of \$6,425* or more?	
(Ja	rt 3: Lis	t Certain F r Debtor 1 Neither I individua During th No. Yes	Payments You Payments You Poebtor 1 nor I primarily for e 90 days bef Go to line List below paid that co	IRA Distribution u Made Before You Filed for 2's debts primarily consume Debtor 2 has primarily consume a personal, family, or househo ore you filed for bankruptcy, di	Bankruptcy r debts? umer debts. Consumer debts Id purpose." id you pay any creditor a total id a total of \$6,425* or more in the for domestic support oblighis bankruptcy case.	of \$6,425* or more? n one or more payment ations, such as child su	s and the total amount you apport and alimony. Also, do
(Ja	rt 3: Lis Are eithe No.	t Certain F or Debtor 1 Neither I individua During th No. Yes * Subject	Payments You Pebtor 1 nor Debtor 1 nor I primarily for e 90 days bef Go to line List below paid that not include to adjustment	IRA Distribution I Made Before You Filed for 2's debts primarily consume Debtor 2 has primarily consume a personal, family, or househo ore you filed for bankruptcy, di 7. each creditor to whom you pareditor. Do not include payment a payments to an attorney for t	Bankruptcy r debts? umer debts. Consumer debts Id purpose." id you pay any creditor a total id a total of \$6,425* or more in ints for domestic support oblig his bankruptcy case. s after that for cases filed on umer debts.	of \$6,425* or more? n one or more payment ations, such as child su or after the date of adju	s and the total amount you apport and alimony. Also, do
(Ja	rt 3: Lis Are eithe No.	t Certain F or Debtor 1 Neither I individua During th No. Yes * Subject	Payments You Pebtor 1 nor Debtor 1 nor I primarily for e 90 days bef Go to line List below paid that not include to adjustment	IRA Distribution I Made Before You Filed for I's debts primarily consume Debtor 2 has primarily consumers Debtor 3 has primarily consumers Debtor 4 have primarily consumers Debtor 4 have primarily consumers Debtor 4 have primarily consumers Debtor 2 has primarily consumer	Bankruptcy r debts? umer debts. Consumer debts Id purpose." id you pay any creditor a total id a total of \$6,425* or more in ints for domestic support oblig his bankruptcy case. s after that for cases filed on umer debts.	of \$6,425* or more? n one or more payment ations, such as child su or after the date of adju	s and the total amount you apport and alimony. Also, do
(Ja	rt 3: Lis Are eithe No.	t Certain F or Debtor 1 Neither I individua During th No. Yes * Subject Debtor 1 During th	Payments You Payme	IRA Distribution I Made Before You Filed for I's debts primarily consume Debtor 2 has primarily consumer Debtor 2 has primarily consumer Debtor 2 has primarily consumer Debtor 3 has primarily consumer Debtor 4 have primarily consumer Debtor 4 have primarily consumer Debtor 4 have primarily consumer Debtor 5 has primarily consumer Debtor 6 have primarily consumer Debtor 7 has primarily consumer Debtor 2 has primarily consumer Debtor 3 has primarily consumer Debtor 4 has primarily consumer Debtor 5 has primarily consumer Debtor 6 has primarily consumer Debtor 9 has primari	Bankruptcy r debts? umer debts. Consumer debts Id purpose." id you pay any creditor a total id a total of \$6,425* or more in ints for domestic support oblig his bankruptcy case. is after that for cases filed on umer debts. id you pay any creditor a total id a total of \$600 or more and	of \$6,425* or more? n one or more payment ations, such as child su or after the date of adju of \$600 or more?	s and the total amount you apport and alimony. Also, do astment.

Case 16-13601 Doc 1 Filed 04/21/16 Entered 04/21/16 11:14:16 Desc Main Document Page 46 of 67 Case number (if known)

7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider.								
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for th	nis payment			
8.	Within 1 year before you filed for bankruptc insider? Include payments on debts guaranteed or cosign		·		eccount of a deb	ot that benefited an			
	Yes. List all payments to an insider								
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the				
Pa	rt 4: Identify Legal Actions, Repossession	s and Forcelosures	•						
9.	Within 1 year before you filed for bankruptc List all such matters, including personal injury of modifications, and contract disputes. No Yes, Fill in the details.								
	Case title	Nature of the case	Court or agency		Status of the	case			
	Case number Franklin Collection vs Kashondra Lyles 2015-M6-001160	Breach of Contract	Clerk of Court, 50 W Washingt Chicago, IL 606	on	Pending On appeal Concluded Garnishing	i			
10.	Within 1 year before you filed for bankruptc Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address			oreclosed, garnis		seized, or levied? Value of the property			
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca ■ No □ Yes. Fill in the details.	tcy, did any creditor, incl		ancial institution	n, set off any am	nounts from your			
	Creditor Name and Address	Describe the action the	creditor took	Date taker	action was	Amount			
12.	Within 1 year before you filed for bankruptc court-appointed receiver, a custodian, or an ■ No □ Yes		rty in the possessi			t of creditors, a			

Case 16-13601 Doc 1 Filed 04/21/16 Entered 04/21/16 11:14:16 Desc Main

Page 47 of 67
Case number (if known) Document Debtor 1 Kashondra R Lyles

Pai	tt 5: List Certain Gifts and Contributions								
13.	Within 2 years before you filed for bankrupto ■ No □ Yes. Fill in the details for each gift.	y, did you give any gifts with a total value of more t	than \$600 per person	?					
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value					
	Person to Whom You Gave the Gift and Address:								
14.	■ No	y, did you give any gifts or contributions with a tot	al value of more than	\$600 to any charity?					
	Yes. Fill in the details for each gift or contri	bution.							
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value					
Pai	tt 6: List Certain Losses								
15.	or gambling?	or since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,					
			Data of vous	Value of manager					
	how the loss occurred Incl	scribe any insurance coverage for the loss ude the amount that insurance has paid. List pending urance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost					
Pai	t 7: List Certain Payments or Transfers								
16.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.								
	□ No								
	Yes. Fill in the details.								
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment					
	Bentz Holguin Law Firm 100 N. LaSalle, Suite 812 Chicago, IL 60602 www.BentzHolguinlaw.com	\$500 towards attorney fees	4/11/16	\$500.00					
	Bentz Holguin Law Firm 100 N. LaSalle, Suite 812 Chicago, IL 60602 www.BentzHolguinLaw.com Hyatt Legal Plan	\$1500.00 for attorney services	4/21/16	\$1,500.00					
	Summit Credit Counseling 4800 E Flowers Street Tucson, AZ 85712 www.Summitfe.org	\$9.95 for credit counseling	4/13/16	\$9.95					

Case 16-13601 Doc 1 Filed 04/21/16 Entered 04/21/16 11:14:16 Desc Main Page 48 of 67
Case number (if known) Document

Debtor 1 Kashondra R Lyles

17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes Fill in the details							
	Yes. Fill in the details. Person Who Was Paid Address	Description and v transferred	alue of any prope	rty	Date payment or transfer was made	Amount of payment		
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes Fill in the details							
	Person Who Received Transfer Address				ny property or received or debts hange	Date transfer was made		
19.	Person's relationship to you Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro ■ No □ Yes. Fill in the details.		y property to a se	lf-settled trus	st or similar device	of which you are a		
	Name of trust	Description and value of the property transferred Date Transferred made						
	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details.							
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	clos	e account was sed, sold, ved, or asferred	Last balance before closing or transfer		
21.	Do you now have, or did you have within 1 y cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	who else had acc Address (Number, State and ZIP Code)	ess to it? De	safe deposit		Do you still have it?		
22.	Have you stored property in a storage unit o No Yes. Fill in the details.		home within 1 ye	ar before you	u filed for bankrupto	cy?		
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, State and ZIP Code)		escribe the c	ontents	Do you still have it?		

Case 16-13601 Doc 1 Filed 04/21/16 Entered 04/21/16 11:14:16 Desc Main Page 49 of 67
Case number (if known) Document

Debtor 1 Kashondra R Lyles

Pai	t 9: Identify Property You Hold or Control for S	omeone Else						
23.	Do you hold or control any property that someon for someone.	ne else owns? Include any proper	rty y	ou borrowed from, are storing for	, or hold in trust			
	■ No							
	Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	De	scribe the property	Value			
Pai	t 10: Give Details About Environmental Informa	tion						
For	the purpose of Part 10, the following definitions a	ipply:						
-	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.							
	Site means any location, facility, or property as of to own, operate, or utilize it, including disposal s	-	law,	whether you now own, operate,	or utilize it or used			
	Hazardous material means anything an environm hazardous material, pollutant, contaminant, or si	nental law defines as a hazardous	s wa	ste, hazardous substance, toxic s	substance,			
Rep	ort all notices, releases, and proceedings that yo	u know about, regardless of when	n the	ey occurred.				
24.	Has any governmental unit notified you that you	may be liable or potentially liable) unc	der or in violation of an environm	ental law?			
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	d	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of any release of hazardous material?							
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	ıd	Environmental law, if you know it	Date of notice			
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.							
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case			
Pai	t 11: Give Details About Your Business or Conn	ections to Any Business						
27.	Within 4 years before you filed for bankruptcy, d	id you own a business or have ar	ıy of	the following connections to any	/ business?			
	☐ A sole proprietor or self-employed in a tr	sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time						
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
	☐ A partner in a partnership							
	☐ An officer, director, or managing executi	ve of a corporation						
	☐ An owner of at least 5% of the voting or	-						

Entered 04/21/16 11:14:16 Case 16-13601 Doc 1 Filed 04/21/16 Page 50 of 67 Case number (if known) Document Debtor 1 Kashondra R Lyles No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Kashondra R Lyles Signature of Debtor 2 Kashondra R Lyles Signature of Debtor 1 Date April 21, 2016 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

☐ Yes. Name of Person

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Revised as of 4/20/2015)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.

- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other

attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.

- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section

726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
 - ■The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
 - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
 - Client communication, review of case and documents. Preparation of Voluntary petition, attendance at 341 and confirmation hearing.
 - (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
 - (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
 - (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
 - (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$2,000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$310.00
- 3. Before signing this agreement, the attorney has received, \$2,000.00 toward the flat fee, leaving a balance due of \$0.00; and \$0.00 for expenses, leaving a balance due for the filing fee of \$0.00
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: April 21, 2016	· ·			
Signed:				
/s/ Kashondra R Lyles	/s/ Jessica Bentz Holguin			
Kashondra R Lyles	Jessica Bentz Holguin 6295877			
	Attorney for the Debtor(s)			
Debtor(s)				
Do not sign this agreement if the amounts are	e blank. Local Bankruptcy Form 23c			

Case 16-13601 Doc 1 Filed 04/21/16 Entered 04/21/16 11:14:16 Desc Main Document Page 60 of 67

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In r	e Kashondra R	Lyles	S			Case No) .	
		_			Debtor(s)	Chapter	13	
	DIS	SCL	OSURE OF CO	OMPENSATIO	ON OF ATTORN	NEY FOR D	DEBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:							
	For legal servi	ces, I h	ave agreed to accept	·		\$	2,000.00	
	Prior to the fili	ng of t	his statement I have				2,000.00	
	Balance Due					\$	0.00	
2.	The source of the co	ompen	sation paid to me wa	s:				
	☐ Debtor		Other (specify):	\$500.00 from Do \$1,500.00 from	ebtor Hyatt Legal Plan			
3.	The source of comp	ensatio	on to be paid to me is	3:				
	Debtor		Other (specify):					
4.	■ I have not agree	ed to sh	are the above-disclo	sed compensation w	ith any other person un	less they are me	mbers and associates	of my law firm.
					n person or persons who			law firm. A
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:							
	b. Preparation and	filing of the o	of any petition, sched	dules, statement of at	e to the debtor in deterr fairs and plan which m firmation hearing, and	ay be required;	-	ıkruptey;
6.	By agreement with	the del	otor(s), the above-dis	closed fee does not i	nclude the following se	ervice:		
				CERTI	FICATION			
this	I certify that the for bankruptcy proceedi		is a complete staten	nent of any agreemer	nt or arrangement for pa	yment to me for	representation of the	debtor(s) in
	April 21, 2016				/s/ Jessica Bentz H	olguin		
_	Date				Jessica Bentz Holg Signature of Attorney Bentz Holguin Law 100 North LaSalle S Suite 812 Chicago, IL 60602	uin 6295877 Firm, LLC Street		
				_	312.881.5112 Fax: JHolguin@BentzHo Name of law firm		n	

United States Bankruptcy Court Northern District of Illinois

In re	Kashondra R Lyles		Case No.					
		Debtor(s)	Chapter	13				
	VERIFICATION OF CREDITOR MATRIX							
		Number of C	reditors:	47				
	The above-named Debtor(s) l (our) knowledge.	hereby verifies that the list of creditor	rs is true and	correct to the best of my				
Date:	April 21, 2016	/s/ Kashondra R Lyles Kashondra R Lyles Signature of Debtor						

AMCA/Amer Medical Collection Agency 4 Westchester Plaza Suite 110 Elmsford, NY 10523

American Honda Finance 2170 Point Blvd Elgin, IL 60123

Armor Systems Co 1700 Kiefer Dr Ste 1 Zion, IL 60099

Barnes Real Estate C/O Lawrence Nathaniel D 2835 N Sheffield 232 Chicago, IL 60657

City of Chicago C/O Heller Frisone LTD 33 N LaSalle 1200 Chicago, IL 60602

Convergent Outsoucing, Inc Po Box 9004 Renton, WA 98057

Dept Of Ed/Navient Attn: Claims Dept Po Box 9400 Wilkes Barr, PA 18773

Dept Of Ed/Navient Attn: Claims Dept Po Box 9400 Wilkes Barr, PA 18773

Dept Of Ed/Navient Attn: Claims Dept Po Box 9400 Wilkes Barr, PA 18773 Dept Of Ed/Navient Attn: Claims Dept Po Box 9400 Wilkes Barr, PA 18773

Dept Of Ed/Navient Attn: Claims Dept Po Box 9400 Wilkes Barr, PA 18773

Dept Of Ed/Navient Attn: Claims Dept Po Box 9400 Wilkes Barr, PA 18773

Dept Of Ed/Navient Attn: Claims Dept Po Box 9400 Wilkes Barr, PA 18773

Dept Of Ed/Navient Attn: Claims Dept Po Box 9400 Wilkes Barr, PA 18773

Dept Of Ed/Navient Attn: Claims Dept Po Box 9400 Wilkes Barr, PA 18773

Dept Of Ed/Navient Attn: Claims Dept Po Box 9400 Wilkes Barr, PA 18773

Dept Of Ed/Navient Attn: Claims Dept Po Box 9400 Wilkes Barr, PA 18773

Dept Of Ed/Navient Attn: Claims Dept Po Box 9400 Wilkes Barr, PA 18773 Franklin Collection Service C/O Blitt & Gaines PC 661 Glenn Avenue Wheeling, IL 60090

Internal Revenue Service Centralized Insolvency Operations PO Box 7346 Philadelphia, PA 19101-7346

Med Business Bureau 1460 Renaissance Dr Suite 400 Park Ridge, IL 60068

Med Business Bureau 1460 Renaissance Dr Suite 400 Park Ridge, IL 60068

Med Business Bureau 1460 Renaissance Dr Suite 400 Park Ridge, IL 60068

Med Business Bureau 1460 Renaissance Dr Suite 400 Park Ridge, IL 60068

Med Business Bureau 1460 Renaissance Dr Suite 400 Park Ridge, IL 60068

Med Business Bureau 1460 Renaissance Dr Suite 400 Park Ridge, IL 60068

Med Business Bureau 1460 Renaissance Dr Suite 400 Park Ridge, IL 60068 Med Business Bureau 1460 Renaissance Dr Suite 400 Park Ridge, IL 60068

Med Business Bureau 1460 Renaissance Dr Suite 400 Park Ridge, IL 60068

Med Business Bureau 1460 Renaissance Dr Suite 400 Park Ridge, IL 60068

Med Business Bureau 1460 Renaissance Dr Suite 400 Park Ridge, IL 60068

Med Business Bureau 1460 Renaissance Dr Suite 400 Park Ridge, IL 60068

Med Business Bureau 1460 Renaissance Dr Suite 400 Park Ridge, IL 60068

Med Business Bureau 1460 Renaissance Dr Suite 400 Park Ridge, IL 60068

Med Business Bureau 1460 Renaissance Dr Suite 400 Park Ridge, IL 60068

Merchants Credit 223 W Jackson Blvd Ste 700 Chicago, IL 60606 Miramed Revenue Group 991 Oak Creek Dr Lombard, IL 60148

Nationwide Credit & Coll Attn Collections/Bankruptcy 815 Commerce Dr Ste 270 Oak Brook, IL 60523

Nationwide Credit & Coll Attn Collections/Bankruptcy 815 Commerce Dr Ste 270 Oak Brook, IL 60523

Portfolio Recovery Attn: Bankruptcy Po Box 41067 Norfolk, VA 23541

Portfolio Recovery Attn: Bankruptcy Po Box 41067 Norfolk, VA 23541

Santander Consumer USA Po Box 961245 Fort Worth, TX 76161

Santander Consumer USA Po Box 961245 Fort Worth, TX 76161

Seaway Bank & Trust Co 645 E 87th St Chicago, IL 60619

Seaway Bank & Trust Co 645 E 87th St Chicago, IL 60619

Seaway Bank & Trust Co 645 E 87th St Chicago, IL 60619

University Of Phoenix 1625 W Fountainhead Pkwy Tempe, AZ 85285